



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET**CONFIRMATION NO. 6449**

Bib Data Sheet

SERIAL NUMBER 10/661,118	FILING OR 371(c) DATE 09/12/2003 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. A-21-1
------------------------------------	---	---------------------	-------------------------------	--------------------------------------

APPLICANTS

Paul O. Davison, Montara, CA;
Jean Woloszko, Mountain View, CA;
Tom Jenkins, Oakland, CA;

**** CONTINUING DATA *******

This application is a CIP of 10/187,733 06/27/2002 which is a CIP of 09/457,201 12/06/1999 which is a CIP of 09/248,763 02/12/1999 PAT 6,149,620 which claims benefit of 60/096,150 08/11/1998 and claims benefit of 60/098,122 08/27/1998

**** FOREIGN APPLICATIONS *******

UNITED STATES OF AMERICA PCT/US03/20574 06/27/2003

IF REQUIRED, FOREIGN FILING LICENSE**GRANTED ** 12/05/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

ADDRESS

21394

TITLE

Instrument for electrosurgical tissue treatment

FILING FEE RECEIVED 804	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---